

Ethics Education

Using storytelling to teach ethics to novice oncology nurses

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BACKGROUND: Oncology nurses face unique challenges in the care of patients from culturally diverse backgrounds. Culture, values, and preferences play important roles in patient decision-making regarding goals of care and treatment.

OBJECTIVES: This article describes the content and outcome of an educational seminar for nurse residents, which uses storytelling to highlight the relationship between dynamic cultural influences and ethical decision-making.

METHODS: A 75-minute didactic seminar using storytelling, role-playing, and simulation was incorporated into a nurse residency program. Stories illustrate the role of oncology nurses in protecting and advocating for vulnerable patients, respecting and accommodating cultural differences, and increasing self-awareness of personal values that may influence decisions. Tests were administered to participants before, immediately after, and three months after the seminar to measure changes in knowledge.

FINDINGS: Over one year, 107 novice oncology nurses, in five cohorts, attended the seminar. Results demonstrated an overall increase and sustainment of knowledge regarding ethical decision-making in nurse residents and illustrated the effectiveness of storytelling as a method to promote ethical decision-making among staff.

KEYWORDS

ethics; bioethics; ethical decision-making; storytelling; cultural diversity

DIGITAL OBJECT IDENTIFIER

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THE UNITED STATES IS BECOMING MORE ETHNICALLY and culturally diverse, with ethnic minorities representing 28% of the population (U.S. Census Bureau, 2019). Such trends translate to health care; as healthcare organizations serve a larger number of individuals from differing backgrounds, focus on providing quality, culturally competent care is paramount (Singh et al., 2018). Culture shapes a person's values and beliefs, including how a person makes meaning out of life and death (Cain et al., 2018).

Cancer is a sundry of diseases, with numerous treatments and varying trajectories. The burdens of cancer and its treatments are complex; decisions regarding goals of care and treatment can strain patient-caregiver-clinician relationships and manifest ethical conundrums. Although advances in knowledge and technology create new or enhanced treatment options, they can also potentiate ethical dilemmas. The ongoing development of novel treatments and supportive therapies have led to individuals living longer with cancer (Markham et al., 2020). Longevity of life and quality of life are not synonymous; the priorities of individuals facing cancer and its treatments vary related to factors such as ethnicity, culture, gender, and age (Shrestha et al., 2019). Reconciling “what can be done” versus “what should be done” is no easy task. The most effective treatment may not be the best treatment when considering individuals' preferences and priorities. The ever-evolving healthcare environment, in combination with differing values of its stakeholders, cultivates fertile ground for misunderstanding, uncertainty, and conflict among healthcare professionals, patients, and caregivers (Hazelwood et al., 2019).

The four bioethical principles of respect for autonomy, beneficence, non-maleficence, and justice, as described by Beauchamp and Childress (2013), create a framework for moral reasoning and ethical practice in health care. Autonomy refers to an individual's right to self-determination. At its core is respect for human dignity. Beneficence refers to a clinician's obligation to “do good” and maximize benefits and minimize burdens of treatment. Non-maleficence purports a clinician's responsibility to prevent harm, and the principle of justice avails fair and equitable distribution of resources. In theory, these core principles are discrete, but in practice they often overlap and, at times, conflict with one another. Oncology nurses are challenged to apply these principles in practice but may not have the moral maturity to do so effectively. Educational programs that support the development of nurses' understanding and ability to integrate these principles in practice are essential to optimizing patient outcomes.

The need for ethics education among nurses is recognized in the literature; however, there is a paucity of evidence describing effective